

CIVIL SERVICE COMMISSION

ENTRY-LEVEL FIREFIGHTER EMPLOYMENT & EXAMINATION APPLICATION

APPLICANT INFORMATION

NAME:					
	(First)	(Middle)		(Last)	
DATE OF BI	RTH:(MM/DD	/YYYY)	VER'S LICENSE:	(Number and State)	
ADDRESS: _					
	(City)		(State)	(Zip Code)	
PHONE NO.	:	ALT	ERNATE PHONE	NO.:	
EMAIL:					
<u>APPLICANT</u>	QUALIFICATION	<u>SECTION</u>			
requirements	0	the following minimum	-	u meet the following minimum be eligible for examination and	
Initial to ackr	nowledge you meet	the following minimum re	equirements:		
la	I am at least 18 years of age, but not 36 years of age or older.				
11	I have earned a high school diploma or GED equivalent.				
la	I am able to read and write English.				
	I am currently certified by the Texas Commission on Fire Protection or will be certified by the applicable examination date.				
	I am currently a certified EMT by the Texas Department of State Health Services or will be certified by the applicable examination date.				
	do not have a reco		ed adjudication fo	r driving while intoxicated within	

	24 months preceding the date of application	n or a suspended driver's license.		
		e of methamphetamines, speed, crank, crack (or any er controlled substance without a prescription during application.		
	I have not been found or admitted to the use of heroin, opium, PCP or have intentionally u LSD, or have ever sold or distributed marijuana or any other controlled substance.			
such, I mu minimum below. I fo untruthful	ust meet minimum eligibility requirements to soligibility requirements as evidenced by my urther understand that if I do not meet the a	regulated by civil service statutes and rules, and as sit for the examination. I believe that I meet the above initials next to each requirement and my signature above minimum eligibility requirements, give false or mit this application at least ten (10) days before the e examination.		
PRINTED	NAME	SIGNATURE		
DATE:				